Approved for use through 7/31/2006. OMB 0651-0032
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Unde	the Paperwork PATE	NT APPLICA	ATION F	EE DETER	RECORD		ss it displays a valid OMB control number. Application or Docket Number 0 6 9 6 336			
Substitute for Form PTO-875 CLAIMS AS FILED — PART I (Column 1) (Column 2)						SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
			(33,000)		REXTRA	RATE	FEE		RATE	FEE
BASIC	FOR	NUMBER	NUMBER FILED NUMBE		REXIRO	KAIL	·\$	OR		s
37 CF	7 CFR 1.16(a))						x s=			
37 CF	R 1.16(c))		minus 20 =			× s=		OR		
	DEPENDENT CLAIMS 7 CFR 1.16(b)) minus 3 = *				× \$=		OR	x s=		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+\$=		OR	+ \$=	
If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	TOTAL	•
10		AIMS AS AME		- PART II .		✓ SMALL E	:NITITY	OR	OTHER SMALL	
	120/04	(Column 1)		(Column 2)	(Column 3)	SMALLE		1		
A F		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
밝	Total (37 CFE 1.16(c))	. 23	Minus	⁻ 23	=	x s=		DR	x s=	
ENDMENT	Independent (a) CFR 1.35(c)	4	Minus	4	" — .	x \$=		OR	×3=	
좕		ATION OF MILETIPLE	DEPENCE	NT CLAIM (37 CF	R 1.16(d))	+ s =		CR	+5=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)	•		_		,
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
21	Total	- AMENOMENT	Minus	••	=	x s=		OR	x s=	
END	(37.0 F 1.16(a)) Inder a naent (37.0°F 1.16(b))	•	Minus	•••	=	x \$=		OR	x s=	
AME	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+5 =		OR	+5 =		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT COSIN (3) GT MICH.				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)			- 1		T
ST		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total	AMENDIVIZATI	Minus	••	=	x \$=		OR	x s=	ļ
\sim	(37 CFR 1.16(c)) Independent	•	Minus	•••	=	x \$=		OR	x s=	
Z	(37 CFR 1.16(b)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								1	1
AMENDMENT	<u> </u>	TATION OF MULTIP	LE DEPEND	ENT CLAIM (37 C	FR 1.16(d))	+ s =		OR	TOTAL	

*** If the "Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

The "Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

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